

# FEC FORM 2

## STATEMENT OF CANDIDACY

SECRETARY OF THE SENATE

16 OCT 19 AM 11:25

1. (a) Name of Candidate (in full) Portman, Rob., The Honora,			2. Candidate's FEC Identification Number S00H00133	
(b) Address (number and street) 825 Miami Avenue		<input type="checkbox"/> Check if address changed		
(c) City, State, and ZIP Code Terrace Park OH 45174-1224		3. Is This Statement <input type="checkbox"/> New (N) OR <input checked="" type="checkbox"/> Amended (A)		
4. Party Affiliation REPUBLICAN PARTY	5. Office Sought Senate	6. State & District of Candidate OH 00		

### DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE

7. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 election(s).  
(year of election)

**NOTE:** This designation should be filed with the appropriate office listed in the instructions.

(a) Name of Committee (in full) Portman For Senate Committee		
(b) Address (number and street) 9856 Archer Lane		
(c) City, State, and ZIP Code Dublin OH 43017-8914		

### DESIGNATION OF OTHER AUTHORIZED COMMITTEES


(Including Joint Fundraising Representatives)

8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

**NOTE:** This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full) Target Races Committee		
(b) Address (number and street) 228 S Washington Street Suite 115		
(c) City, State, and ZIP Code Alexandria VA 22314-5404		

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Signature of Candidate Portman, Rob., The Honora,		Date 10/12/2016
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**NOTE:** Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.

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201610210200512561

# FORM 2S - STATEMENT OF CANDIDACY (Supplemental Page)

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## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

United For A Senate Majority

(b) Address (number and street)

3595 Ranch Road 620 S  
Suite 200

(c) City, State and ZIP Code

Austin

TX

78738-6803

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

2016 Senate Majority Committee

(b) Address (number and street)

PO Box 751271

(c) City, State and ZIP Code

Las Vegas

NV

89136-1271

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Save Our Senate

(b) Address (number and street)

228 S Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

201610210200512562

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## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Protecting the Majority Fund

(b) Address (number and street)

228 S Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

2016 Senators Classic Committee

(b) Address (number and street)

228 S Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Ayotte-Portman-Thune Committee

(b) Address (number and street)

228 S Washington Street

(c) City, State and ZIP Code

Alexandria

VA

22314-5408

201610210200512563

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## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Portman-Ohio Victory

(b) Address (number and street)

228 S Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Portman Victory Committee

(b) Address (number and street)

228 S Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

2015 Senators Classic

(b) Address (number and street)

228 S Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

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## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Burr Portman Victory Committee

(b) Address (number and street)

228 S Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Americans United For Freedom

(b) Address (number and street)

228 S Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Hold The Senate 2016

(b) Address (number and street)

228 S Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

201610210200512365

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## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

Ayotte Portman Victory Committee

(b) Address (number and street)

228 S Washington Street  
Suite 115

(c) City, State and ZIP Code

Alexandria

VA

22314-5404

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

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NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

## DESIGNATION OF OTHER AUTHORIZED COMMITTEES

[ ADDITIONAL ]

(Including Joint Fundraising Representatives)

I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.

NOTE: This designation should be filed with the principal campaign committee.

(a) Name of Committee (in full)

(b) Address (number and street)

(c) City, State and ZIP Code

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Post Office

Post Office

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SECRETARY OF THE SENATE  
232 HART SENATE OFFICE BUILDING  
WASHINGTON DC 20510  
REF: NATALIE BAUR  
DEPT:  
INV: (202) 224-0758  
PO:  
ORIGIN ID: OSUA  
NATALIE BAUR  
PORTMAN FOR SENATE  
9856 ARCHER LANE  
DUBLIN OH 43017  
UNITED STATES US  
SHIP DATE: 13OCT16  
ACTWGT: 0.50 LB  
CAD: 100584870/NET3790  
BILL SENDER

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# United States Senate

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OFFICE OF PUBLIC RECORDS

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Date of Receipt Postmark

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Postmark

USPS PRIORITY MAIL \_\_\_\_\_  
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DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LABEL ☐

USPS EXPRESS MAIL \_\_\_\_\_  
Postmark

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UPS	_____	<input type="checkbox"/>
DHL	_____	<input type="checkbox"/>
AIRBORNE EXPRESS	_____	<input type="checkbox"/>

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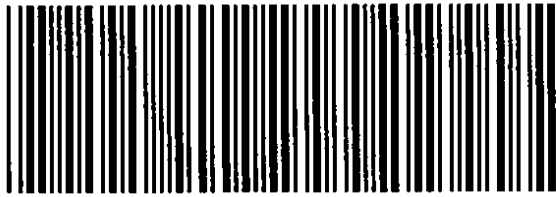
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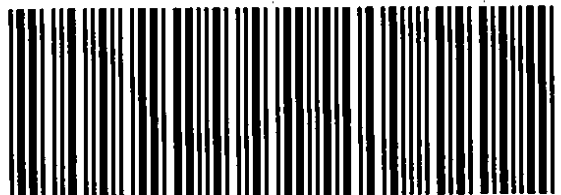
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